Fannin County, TX

Payable Register

Payable Detail by Vendor Name

Packet: APPKT02209 - AP CC 12.17.24 IHC Regular Payables

Payable # / Payable Description	Payable Type	Post Date / Bank Code	Payable Date	Due Date	Discount Date / On Hold	Amount	Tax	Shipping	Discount	Total

Vendor: 01277 - Bonham Family Drug — **Vendor Total:** **1,454.10**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230512 01277 17 NJG	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	561.40	0.00	0.00	0.00	561.40

Indigent File — Pooled Cash - Pooled Cash — No

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	561.40	0.00	0.00	0.00	561.40

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		561.40	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230714 01277 16 KM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	52.10	0.00	0.00	0.00	52.10

Indigent File — Pooled Cash - Pooled Cash — No

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	29.20	0.00	0.00	0.00	29.20

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		29.20	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	22.90	0.00	0.00	0.00	22.90

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		22.90	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
231001 01277 25 KL	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	58.90	0.00	0.00	0.00	58.90

Indigent File — Pooled Cash - Pooled Cash — No

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	21.00	0.00	0.00	0.00	21.00

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		21.00	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	27.90	0.00	0.00	0.00	27.90

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		27.90	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	10.00	0.00	0.00	0.00	10.00

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		10.00	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
231103 01277 25 JJJ	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	582.30	0.00	0.00	0.00	582.30

Indigent File — Pooled Cash - Pooled Cash — No

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
Payable Description	**Bank Code**				**On Hold**					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	582.30	0.00	0.00	0.00	582.30

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		582.30	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
240405 01277 7 CH	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	69.40	0.00	0.00	0.00	69.40
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	27.20	0.00	0.00	0.00	27.20

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		27.20	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	21.50	0.00	0.00	0.00	21.50

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		21.50	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	20.70	0.00	0.00	0.00	20.70

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		20.70	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
240811 01277 1 RR	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	130.00	0.00	0.00	0.00	130.00
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	21.70	0.00	0.00	0.00	21.70

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		21.70	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	80.20	0.00	0.00	0.00	80.20

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		80.20	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	28.10	0.00	0.00	0.00	28.10

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4120	PRESCRIPTIONS, DRUGS		28.10	100.00%

Vendor: 01223 - CONCORD RADIOLOGY **Vendor Total:** **325.03**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230512 01223 1 NJG	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	6.95	0.00	0.00	0.00	6.95
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	6.95	0.00	0.00	0.00	6.95

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4150	LABORATORY/ X-RAY		6.95	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
Payable Description		Bank Code			On Hold					
SO21403 01223 1 CS	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	32.08	0.00	0.00	0.00	32.08
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	32.08	0.00	0.00	0.00	32.08

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		32.08	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
SO24117 01223 1 LBJ	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	66.02	0.00	0.00	0.00	66.02
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	66.02	0.00	0.00	0.00	66.02

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		66.02	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
SO2999810 01223 2 CM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	213.30	0.00	0.00	0.00	213.30
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	68.96	0.00	0.00	0.00	68.96

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		68.96	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	37.42	0.00	0.00	0.00	37.42

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		37.42	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	37.42	0.00	0.00	0.00	37.42

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		37.42	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	37.42	0.00	0.00	0.00	37.42

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		37.42	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	32.08	0.00	0.00	0.00	32.08

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		32.08	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
SO40927 01223 1 DH	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	6.68	0.00	0.00	0.00	6.68
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	6.68	0.00	0.00	0.00	6.68

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		6.68	100.00%

Payable # / Payable Description	Payable Type	Post Date / Bank Code	Payable Date	Due Date	Discount Date / On Hold	Amount	Tax	Shipping	Discount	Total

Vendor: 01177 - FANNIN CO. HOSPITAL AUTH. **Vendor Total:** **24,275.69**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
210634 01177 10 TC	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	951.84	0.00	0.00	0.00	951.84
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	951.84	0.00	0.00	0.00	951.84

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		951.84	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230714 01177 8 KM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	813.60	0.00	0.00	0.00	813.60
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	813.60	0.00	0.00	0.00	813.60

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		813.60	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
231001 01177 10 KL	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	301.68	0.00	0.00	0.00	301.68
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	301.68	0.00	0.00	0.00	301.68

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		301.68	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
231001 01177 11 KL	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	962.27	0.00	0.00	0.00	962.27
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	962.27	0.00	0.00	0.00	962.27

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		962.27	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
231001 01177 9 KL	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	976.32	0.00	0.00	0.00	976.32
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	976.32	0.00	0.00	0.00	976.32

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		976.32	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
240809 01177 1 LK	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	993.60	0.00	0.00	0.00	993.60
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	993.60	0.00	0.00	0.00	993.60

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		993.60	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
240810 01177 3 LES	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	166.63	0.00	0.00	0.00	166.63
Indigent File		Pooled Cash - Pooled Cash			No					

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
Payable Description	Bank Code				On Hold					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	166.63	0.00	0.00	0.00	166.63

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		166.63	100.00%

240810 01177 4 LES	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	1,888.85	0.00	0.00	0.00	1,888.85
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	1,888.85	0.00	0.00	0.00	1,888.85

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		1,888.85	100.00%

240811 01177 1 RR	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	1,326.34	0.00	0.00	0.00	1,326.34
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	1,326.34	0.00	0.00	0.00	1,326.34

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		1,326.34	100.00%

240811 01177 2 RR	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	891.56	0.00	0.00	0.00	891.56
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	891.56	0.00	0.00	0.00	891.56

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		891.56	100.00%

SO23322 01177 1 RW	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	193.50	0.00	0.00	0.00	193.50
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	193.50	0.00	0.00	0.00	193.50

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		193.50	100.00%

SO2999810 01177 3 CM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	10,443.42	0.00	0.00	0.00	10,443.42
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	10,443.42	0.00	0.00	0.00	10,443.42

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		10,443.42	100.00%

SO42725 01177 1 CO	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	3,965.58	0.00	0.00	0.00	3,965.58
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	3,965.58	0.00	0.00	0.00	3,965.58

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		3,965.58	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
Payable Description		Bank Code			On Hold					
SO42766 01177 1 AB	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	400.50	0.00	0.00	0.00	400.50
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	400.50	0.00	0.00	0.00	400.50

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		400.50	100.00%

Vendor: 01107 - HUNT REGIONAL MEDICAL CENTER — **Vendor Total:** **63.56**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230714 01107 4 KM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	63.56	0.00	0.00	0.00	63.56
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	63.56	0.00	0.00	0.00	63.56

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4140	HOSPITAL, OUTPATIENT		63.56	100.00%

Vendor: 01254 - Hunt Regional Medical Partners Specialists — **Vendor Total:** **323.98**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230714 01254 7 KM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	323.98	0.00	0.00	0.00	323.98
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	168.40	0.00	0.00	0.00	168.40

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		168.40	100.00%

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	155.58	0.00	0.00	0.00	155.58

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		155.58	100.00%

Vendor: 01286 - Level One Emergency Physician — **Vendor Total:** **81.24**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
SO42762 01286 1 JS	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	81.24	0.00	0.00	0.00	81.24
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	81.24	0.00	0.00	0.00	81.24

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		81.24	100.00%

Vendor: 01302 - Lung Specialist Associates of Texas PLLC — **Vendor Total:** **622.01**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230511 01302 1 HM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	61.17	0.00	0.00	0.00	61.17
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	61.17	0.00	0.00	0.00	61.17

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		61.17	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230511 01302 10 HM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	61.17	0.00	0.00	0.00	61.17
Indigent File		Pooled Cash - Pooled Cash			No					

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
Payable Description		Bank Code			On Hold					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	61.17	0.00	0.00	0.00	61.17

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		61.17	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230511 01302 11 HM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	61.17	0.00	0.00	0.00	61.17
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	61.17	0.00	0.00	0.00	61.17

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		61.17	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230511 01302 2 HM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	120.14	0.00	0.00	0.00	120.14
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	120.14	0.00	0.00	0.00	120.14

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		120.14	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230511 01302 3 HM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	45.48	0.00	0.00	0.00	45.48
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230511 01302 4 HM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	45.48	0.00	0.00	0.00	45.48
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230511 01302 5 HM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	45.48	0.00	0.00	0.00	45.48
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230511 01302 6 HM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	45.48	0.00	0.00	0.00	45.48
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Payable # / Payable Description	Payable Type / Bank Code	Post Date	Payable Date	Due Date	Discount Date / On Hold	Amount	Tax	Shipping	Discount	Total
230511 01302 7 HM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	45.48	0.00	0.00	0.00	45.48
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Payable # / Payable Description	Payable Type / Bank Code	Post Date	Payable Date	Due Date	Discount Date / On Hold	Amount	Tax	Shipping	Discount	Total
230511 01302 8 HM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	45.48	0.00	0.00	0.00	45.48
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Payable # / Payable Description	Payable Type / Bank Code	Post Date	Payable Date	Due Date	Discount Date / On Hold	Amount	Tax	Shipping	Discount	Total
230511 01302 9 HM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	45.48	0.00	0.00	0.00	45.48
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		45.48	100.00%

Vendor: 01231 - North Texas Comprehensive Cardiology **Vendor Total:** **47.68**

Payable # / Payable Description	Payable Type / Bank Code	Post Date	Payable Date	Due Date	Discount Date / On Hold	Amount	Tax	Shipping	Discount	Total
231103 01231 5 JJJ	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	47.68	0.00	0.00	0.00	47.68
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	47.68	0.00	0.00	0.00	47.68

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		47.68	100.00%

Vendor: 01215 - QUESTCARE INTENSIVISTS, PLLC **Vendor Total:** **108.17**

Payable # / Payable Description	Payable Type / Bank Code	Post Date	Payable Date	Due Date	Discount Date / On Hold	Amount	Tax	Shipping	Discount	Total
SO42652 01215 1 SF	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	64.15	0.00	0.00	0.00	64.15
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	64.15	0.00	0.00	0.00	64.15

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		64.15	100.00%

Payable # / Payable Description	Payable Type / Bank Code	Post Date	Payable Date	Due Date	Discount Date / On Hold	Amount	Tax	Shipping	Discount	Total
SO42652 01215 2 SF	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	44.02	0.00	0.00	0.00	44.02
Indigent File	Pooled Cash - Pooled Cash				No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	44.02	0.00	0.00	0.00	44.02

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		44.02	100.00%

Vendor: 01265 - Radiology Associates of North Texas **Vendor Total:** **56.13**

Payable # / Payable Description	Payable Type / Bank Code	Post Date	Payable Date	Due Date	Discount Date / On Hold	Amount	Tax	Shipping	Discount	Total
240405 01265 1 CH	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	56.13	0.00	0.00	0.00	56.13
Indigent File	Pooled Cash - Pooled Cash				No					

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
Payable Description		Bank Code			On Hold					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	56.13	0.00	0.00	0.00	56.13

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4150	LABORATORY/ X-RAY		56.13	100.00%

Vendor: 01301 - Raymond Delpak Vendor Total: **45.48**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
SO40983 01301 1 JGS	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	45.48	0.00	0.00	0.00	45.48
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	45.48	0.00	0.00	0.00	45.48

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-565-4050	PRISONER MEDICAL		45.48	100.00%

Vendor: 00220 - RED RIVER VALLEY RADIOLOGY Vendor Total: **56.13**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
230714 00220 2 KM	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	56.13	0.00	0.00	0.00	56.13
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	56.13	0.00	0.00	0.00	56.13

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4150	LABORATORY/ X-RAY		56.13	100.00%

Vendor: 01168 - TEXOMACARE SPECIALTY PHYSICIANS Vendor Total: **6.42**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
220713 01168 8 RB	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	6.42	0.00	0.00	0.00	6.42
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	6.42	0.00	0.00	0.00	6.42

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		6.42	100.00%

Vendor: 00605 - TMC BONHAM SPECIALTY CLINIC Vendor Total: **47.68**

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
231001 00605 13 KL	Invoice	12/17/2024	12/17/2024	12/17/2024	12/17/2024	47.68	0.00	0.00	0.00	47.68
Indigent File		Pooled Cash - Pooled Cash			No					

Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Medical	NA	0.00	0.00	47.68	0.00	0.00	0.00	47.68

Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
100-645-4110	PHYSICIAN, NON-EMERGENCY		47.68	100.00%

Payable Summary

Type	Count	Gross	Tax	Shipping	Discount	Total	Manual Payment	Balance
Invoice	47	27,513.30	0.00	0.00	0.00	27,513.30	0.00	27,513.30
	Grand Total:	**27,513.30**	**0.00**	**0.00**	**0.00**	**27,513.30**	**0.00**	**27,513.30**

Account Summary

Account	Name		Amount
100-565-4050	PRISONER MEDICAL		15,555.97
100-645-4110	PHYSICIAN, NON-EMERGENCY		1,047.77
100-645-4120	PRESCRIPTIONS, DRUGS		1,454.10
100-645-4140	HOSPITAL, OUTPATIENT		9,336.25
100-645-4150	LABORATORY/ X-RAY		119.21
		Total:	**27,513.30**